

APPLICATION FOR EMPLOYMENT



Personnel Office • P.O. Box 302 • Hahnville, Louisiana 70057 • (985) 783-5000

DATE: _____

PERSONAL DATA

NAME: _____ SOCIAL SECURITY #: _____ - _____ - _____
LAST FIRST MIDDLE

HOME ADDRESS: _____
NUMBER & STREET CITY STATE ZIP CODE

MAILING ADDRESS (IF DIFFERENT) _____
CITY STATE ZIP CODE

HOME TELEPHONE: (____) _____ WORK TELEPHONE (____) _____ EXT. ____

EXACT JOB TITLE OR AREA OF WORK YOU ARE SEEKING:

**ST. CHARLES PARISH IS AN EQUAL OPPORTUNITY EMPLOYER
IN ACCORDANCE WITH LOCAL, STATE AND FEDERAL LAWS.**

Notice to Applicant:

Complete this application carefully and completely. This information will aid us in evaluating your qualifications. Please attach additional paper and/or documents if necessary to more fully explain your answers. St. Charles Parish welcomes all qualified applicants without regard to their race, color, religion, gender, national origin, age, marital status, medical condition or disability. All offers of employment are conditional upon successfully passing all required examinations and lab tests to include a drug screen. Physical and/or other examinations are used to determine whether applicants are qualified to perform the essential functions of the position with or without reasonable accommodation.

JOB INFORMATION

TYPE OF JOB: ☐ FULL TIME YEAR ROUND ☐ PART TIME YEAR ROUND WORKING _____ HRS/WK
☐ SEASONAL: FROM _____ (DAY/MO) THROUGH _____ (DAY/MO) WORKING _____ HRS/WK

CAN YOU PERFORM ALL THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING? ☐ YES ☐ NO

IF NOT, PLEASE EXPLAIN ACCOMMODATION REQUIRED: _____

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.? ☐ YES ☐ NO

ARE YOU OF LEGAL AGE TO WORK? ☐ YES ☐ NO

IF DRIVING A VEHICLE IS A REQUIREMENT OF THE JOB BEING APPLIED FOR, PLEASE PROVIDE:

DRIVER'S LICENSE #: _____ CLASS: _____ STATE: _____ EXP. DATE ____/____/____

****FOR POSITIONS WHICH REQUIRE SPECIFIC LICENSES, COPIES OF LICENSES WILL BE REQUIRED AT THE TIME OF AN INTERVIEW****

HAVE YOU EVER BEEN EMPLOYED BY THE PARISH? ☐ YES ☐ NO

IF SO, WHEN: ____/____/____ TO ____/____/____ AND IN WHAT CAPACITY? _____

IF YOU HAVE PREVIOUSLY FILED AN APPLICATION OR TESTED FOR A JOB WITH THE PARISH, PLEASE INDICATE:

POSITION TITLE: _____ YEAR/MONTH: _____

EDUCATIONAL RECORD

NAME AND LOCATION OF HIGH SCHOOL: _____

DID YOU GRADUATE? ☐ YES ☐ NO CIRCLE HIGHEST GRADE COMPLETED: 9 10 11 12 GED

DATE OF GRADUATION _____

DATE GED COMPLETED _____

LIST COLLEGES OR UNIVERSITIES ATTENDED:

NAME / LOCATION

COURSES OR AREA OF STUDY / CREDITS / DEGREE

DID YOU GRADUATE? ☐ YES ☐ NO

DATE OF GRADUATION _____

LIST ANY OTHER SPECIALIZED TRAINING OR CERTIFICATIONS RECEIVED OTHER THAN HIGH SCHOOL OR COLLEGE:

For positions which require high school graduation or GED, or a college degree, a copy of the high school diploma / GED certificate or college diploma will be required at the time of interview.

EMPLOYMENT HISTORY

BEGIN WITH PRESENT EMPLOYERS AND WORK BACK FOR ALL PLACES OF EMPLOYMENT DURING THE LAST TEN YEARS. CURRENT AND PRIOR EMPLOYERS ARE NOT CONTACTED UNTIL AFTER THE INTERVIEW STAGE OF A SELECTION PROCESS. USE ADDITIONAL SHEETS IF NECESSARY. RESUMES OR ADDITIONAL SHEETS MAY BE INCLUDED WITH THIS APPLICATION, BUT CANNOT BE SUBSTITUTED FOR THIS SECTION OF THE APPLICATION.

Employer's Name: _____

Address: _____

Supervisor's Name and Title: _____

Your Title: _____ ☐ Full Time ☐ Part Time @ Hrs/Wk _____

Your Duties: _____

From: _____ (Mo/Yr) To: _____ (Mo/Yr)

Annual Salary: \$ _____ Reason for Leaving: _____

Employer's Name: _____

Address: _____

Supervisor's Name and Title: _____

Your Title: _____ ☐ Full Time ☐ Part Time @ Hrs/Wk _____

Your Duties: _____

From: _____ (Mo/Yr) To: _____ (Mo/Yr)

Annual Salary: \$ _____ Reason for Leaving: _____

Employer's Name: _____

Address: _____

Supervisor's Name and Title: _____

Your Title: _____ ☐ Full Time ☐ Part Time @ Hrs/Wk _____

Your Duties: _____

From: _____ (Mo/Yr) To: _____ (Mo/Yr)

Annual Salary: \$ _____ Reason for Leaving: _____

Employer's Name: _____

Address: _____

Supervisor's Name and Title: _____

Your Title: _____ ☐ Full Time ☐ Part Time @ Hrs/Wk _____

Your Duties: _____

From: _____ (Mo/Yr) To: _____ (Mo/Yr)

Annual Salary: \$ _____ Reason for Leaving: _____

LIST ANY OTHER WORK EXPERIENCE NOT LISTED ABOVE THATG RELATES TO THE JOB APPLIED FOR:

ADDITIONAL INFORMATION

PLEASE IDENTIFY ANY EXTENDED PERIODS OF NON-WORK REFLECTED IN THE **EMPLOYMENT HISTORY** SECTION AND GIVE THE REASON:

FROM: _____ TO: _____ REASON: _____

FROM: _____ TO: _____ REASON: _____

FROM: _____ TO: _____ REASON: _____

HAVE YOU BEEN CONVICTED OF ANY VIOLATIONS OF THE LAW SINCE YOUR 16TH BIRTHDAY?

(DO NOT INCLUDE ANY TRAFFIC VIOLATIONS) ☐ YES ☐ NO

CONVICTION OF A VIOLATION OF THE LAW DOES NOT AUTOMATICALLY BAR YOU FROM EMPLOYMENT. EACH CASE IS CONSIDERED ON ITS INDIVIDUAL MERITS AND EVALUATED IN RELATION TO THE POSITION.

(PLEASE LIST: DATE / OFFENSE / LOCATION / DISPOSITION).

IF DRIVING A VEHICLE IS A REQUIREMENT OF THE JOB, LIST ALL TRAFFIC VIOLATIONS OR TICKETS YOU HAVE HAD IN THE PAST FIVE YEARS, AS WELL AS ANY DRIVER'S LICENSE SUSPENSIONS OR REVOCATIONS.

(PLEASE LIST: DATE / OFFENSE / LOCATION / DISPOSITION).

1. _____
2. _____
3. _____

LIST THREE PERSONAL ACQUAINTANCES WHO CAN GIVE REFERENCE OF YOUR CHARACTER AND ABILITY. DO NOT INCLUDE RELATIVES.

NAME & ADDRESS	TELEPHONE	OCCUPATION	YEARS ACQUAINTED

I understand and agree that, as a condition of employment and, if employed, as a condition employment, I may be required to submit to drug and alcohol screening tests to determine compliance with the St. Charles Parish Substance Abuse Policy. Failure to comply with the testing program will be grounds for disqualification or immediate discharge. I understand that I can review and receive a copy of the Parish's Substance Abuse Policy upon request.

In filling out this application, I understand that St. Charles Parish is in no way obligated to provide nor am I obligated to accept employment. I understand that an investigation report may be made whereby information is obtained through personal interviews and third parties, such as past employers, business associates, financial sources, friends, neighbors, or others with whom I am acquainted. This inquiry may include information as to my character, general reputation and mode of living, whichever may be applicable and appropriate.

I hereby certify that all answers and statements contained in this application are true and complete to the best of my knowledge. I understand that any falsified or misleading statements of fact will subject me to dismissal or disqualification. I hereby authorize St. Charles Parish to conduct whatever investigation is necessary and appropriate for the position(s) for which I am applying to include a full criminal history record check and a driving record check. I hereby authorize verification of the information given on this application and authorize release of all requested information in connection with this application for employment. I understand that any employment will be "at will", which means that the Parish has no obligation to employ me in the future. I also understand that this application is the property of St. Charles Parish and will become a part of my personnel file if I am hired.

Signature: _____ Date: _____

(Applicant must sign in order to be considered for any position with St. Charles Parish)